



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2005</b><br><b>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</b>  |            | Docket Number (Optional)<br>0019240.00232US1 |
|--|------------|--|
| Application Number<br>09/589500-Conf. #8506  |            | Filed<br>June 7, 2000                        |
| For UNIFIED MONITORING AND DETECTION OF INTRUSION ATTACKS IN AN ELECTRONIC SYSTEM  |            |  |
| Art Unit 2131  |            | Examiner C. A. Laforgia                      |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p>   |            |  |
|  | <u>Fee</u> | <u>Small Entity Fee</u>                      |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$120      | \$60   |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))  | \$450      | \$225  |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))   | \$1020     | \$510  |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))   | \$1590     | \$795  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))   | \$2160     | \$1080                                       |
| <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>08-0219</u>. I have enclosed a duplicate copy of this sheet.</p> |            |  |
| <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br/>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input type="checkbox"/> attorney or agent of record. Registration Number _____</p> <p><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34.<br/>Registration number if acting under 37 CFR 1.34 <u>40,934</u>.</p>   |            |  |
| <br>Signature   |            | Date<br>April 5, 2006                        |
| Matthew T. Byrne<br>Typed or printed name  |            | Telephone Number<br>(212) 230-8800           |
| <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.</p>   |            |  |

04/07/2006 SFELEKE1 00000017 080219 09589500

01 FC:2253 510.00 DA

Express Mail Label No. EV 604921160 US Dated: April 5, 2006